



GEORGIA DEPARTMENT OF HUMAN RESOURCES

Food Service Establishment Inspection Report

Establishment Name: Broadway Showcase
Address: 535 Glynn St, Suite 1003

City: Fayetteville,

Time In: 3:00 pm

Time Out: 3:50 pm

Inspection Date: 6/22/2010

CFSM: Post within 90 days

Purpose of Inspection: Routine: ☒ Follow-Up: ☐ Complaint: ☐
Preliminary: ☐ Other: ☐

Risk Type: 1 ☐ 2 ☒ 3 ☐ **Permit#:** 2-98185

'Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.

'Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Last Score

Grade

Date

Prior Score

Grade

Date

CURRENT SCORE

CURRENT GRADE

98

A

SCORING AND GRADING:

A=90-100 B=80-89 C=70-79 U<69

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance **OUT**=not in compliance **NO**=not observed **NA**=not applicable **COS**=corrected on-site during inspection **R**=repeat (violation of the same code provision)=2 points per subcategory

| Compliance Status | | | | | COS | R |
|-------------------|----------------------------------|-----------------------|----|----|---|----------|
| 1 | IN | OUT | NA | NO | Supervision | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 1-2. Person in charge present, demonstrates knowledge, and performs duties | 4 points |
| | | | | | | |
| 2 | IN | OUT | NA | NO | Employee Health, Good Hygienic Practices, Preventing Contamination by Hands-Subcategory 1 | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-1A. Proper use of restriction & exclusion | 9 points |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-1B. Hands clean and properly washed | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | Employee Health, Good Hygienic Practices-Subcategory 2 | 4 points |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2A. Management awareness; policy present; reporting | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2B. Proper eating, tasting, drinking, or tobacco use | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2C. No discharge from eyes, nose, and mouth | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 2-2D. Adequate handwashing facilities supplied & accessible | |
| 3 | IN | OUT | NA | NO | Approved Source | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 3-1A. Food obtained from approved source; parasite destruction | 9 points |
| | <input type="radio"/> | <input type="radio"/> | | | 3-1B. Food received at proper temperature | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 3-1C. Food in good condition, safe, and unadulterated | |
| 4 | IN | OUT | NA | NO | Protection from Contamination-Subcategory 1 | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-1A. Food separated and protected | 9 points |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-1B. Proper disposition of contaminated food; returned food or unused food not re-served | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | Protection from Contamination-Subcategory 2 | 4 points |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-2A. Food stored covered | |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 4-2B. Food-contact surfaces: cleaned & sanitized | |

| Compliance Status | | | | | COS | R |
|-------------------|----------------------------------|-----------------------|----------------------------------|----------------------------------|---|----------|
| 5 | IN | OUT | NA | NO | Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1 | |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 5-1A. Proper cooking time and temperatures | 9 points |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 5-1B. Proper reheating procedures for hot holding | |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | Consumer Advisory-Subcategory 2 | 4 points |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 5-2. Consumer advisory provided for raw and undercooked foods | |
| 6 | IN | OUT | NA | NO | Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Food-Subcategory 1 | |
| | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | | 6-1A. Proper cold holding temperatures | 9 points |
| | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 6-1B. Proper hot holding temperatures | |
| | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 6-1C. Proper cooling time and temperature | |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | 6-1D. Time as a public health control: procedures and records | |
| | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | Date Marking-Subcategory 2 | 4 points |
| | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | 6-2. Proper date marking and disposition | |
| 7 | IN | OUT | NA | NO | Highly Susceptible Populations | |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | | 7-1. Pasteurized foods used; prohibited foods not offered | 9 points |
| 8 | IN | OUT | NA | NO | Chemicals | |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | | 8-2A. Food additives: approved and properly used | 4 points |
| | <input checked="" type="radio"/> | <input type="radio"/> | | | 8-2B. Toxic substances properly identified, stored, used | |
| 9 | IN | OUT | NA | NO | Conformance with Approved Procedures | |
| | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | | 9-2. Compliance with variance, specialized process and HACCP plan | 4 points |

GOOD RETAIL PRACTICES

(Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R for each item as applicable. R=Repeat (violation of the same code provision) = 1 point per

| Compliance Status | | | | | COS | R |
|-------------------|-----------------------|---|--|--|----------|---|
| 10 | OUT | Safe Food and Water, Food Identification | | | 3 points | |
| | <input type="radio"/> | 10A. Pasteurized eggs used where required | | | | |
| | <input type="radio"/> | 10B. Water and ice from approved source | | | | |
| | <input type="radio"/> | 10C. Variance obtained for specialized processing methods | | | | |
| | <input type="radio"/> | 10D. Food properly labeled; original container; required records available; shellstock tags | | | | |
| 11 | OUT | Food Temperature Control | | | 3 points | |
| | <input type="radio"/> | 11A. Proper cooling methods used; adequate equipment for temperature control | | | | |
| | <input type="radio"/> | 11B. Plant food properly cooked for hot holding | | | | |
| | <input type="radio"/> | 11C. Approved thawing methods used | | | | |
| | <input type="radio"/> | 11D. Thermometers provided and accurate | | | | |
| 12 | OUT | Prevention of Food Contamination | | | 3 points | |
| | <input type="radio"/> | 12A. Contamination prevented during food preparation, storage, display | | | | |
| | <input type="radio"/> | 12B. Personal cleanliness | | | | |
| | <input type="radio"/> | 12C. Wiping cloths: properly used and stored | | | | |
| | <input type="radio"/> | 12D. Washing fruits and vegetables | | | | |
| 13 | OUT | Postings and Compliance with Clean Air Act | | | 3 points | |
| | <input type="radio"/> | 13A. Posted: Permit/Inspection/Choking Poster/Handwashing | | | | |
| | <input type="radio"/> | 13B. Compliance with Georgia Smoke Free Air Act | | | | |

| Compliance Status | | | | | COS | R |
|-------------------|----------------------------------|--|--|--|----------|---|
| 14 | OUT | Proper Use of Utensils | | | 1 point | |
| | <input type="radio"/> | 14A. In-use utensils: Properly stored | | | | |
| | <input type="radio"/> | 14B. Utensils, equipment and linens: properly stored, dried, handled | | | | |
| | <input type="radio"/> | 14C. Single-use/single-service articles: properly stored, used | | | | |
| | <input type="radio"/> | 14D. Gloves used properly | | | | |
| 15 | OUT | Utensils, Equipment and Vending | | | 1 point | |
| | <input type="radio"/> | 15A. Food & nonfood-contact surfaces cleanable, properly designed, constructed, used | | | | |
| | <input type="radio"/> | 15B. Warewashing facilities: installed, maintained, used; test strips | | | | |
| | <input type="radio"/> | 15C. Nonfood-contact surfaces clean. | | | | |
| 16 | OUT | Water, Plumbing and Waste | | | 2 points | |
| | <input type="radio"/> | 16A. Hot and cold water available; adequate pressure | | | | |
| | <input checked="" type="radio"/> | 16B. Plumbing installed; proper backflow devices | | | | |
| | <input type="radio"/> | 16C. Sewage and waste water properly disposed | | | | |
| 17 | OUT | Physical Facilities | | | 1 point | |
| | <input type="radio"/> | 17A. Toilet facilities: properly constructed, supplied, cleaned | | | | |
| | <input type="radio"/> | 17B. Garbage/refuse properly disposed; facilities maintained | | | | |
| | <input type="radio"/> | 17C. Physical facilities installed, maintained, and clean | | | | |
| | <input type="radio"/> | 17D. Adequate ventilation and lighting; designated areas used | | | | |
| 18 | OUT | Pest and Animal Control | | | 3 points | |
| | <input type="radio"/> | 18. Insects, rodents, and animals not present | | | | |

Person in Charge (Signature):

(Print)

Date: 6/22/2010 3:00:00 PM

Inspector (Signature):

Follow-up: Yes ☐ No ☒

Follow-up Date:

Food Service Establishment Inspection Report Addendum

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Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsection (2)(i) and (j)

| | | |
|--|--|--------------------------------|
| Establishment Broadway Showcase | Permit 2-98185 | Date InspectionDate2 |
| Address 535 Glynn St, Suite 1003 | City/State Fayetteville,, GA 30214 | Zip Code 30214 |

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|-------------------------|---------------|---------------|------|---------------|------|
| Reach in rear | 37 | | | | |
| Reach in display | 41 | | | | |
| reach in display | 40 | | | | |
| gelato unit | 20 | | | | |
| | | | | | |
| 3 compartment sink quat | not set up | | | | |
| | | | | | |
| | | | | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

| Item Number | |
|-------------|---|
| S16 | 16-B Need to replace third sink bowl faucet or provide longer/folding faucet to reach all 3 bowls. Correct by post open inspection. |

| | |
|-------------------------------------|----------------------------------|
| Person in Charge (Signature) | Date |
| Inspector (Signature) | Date 6/22/2010 3:00:00 PM |

